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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 82922(302934)								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="height: 40px; vertical-align: top;">In re Application of Carmen Barske et al.</td> </tr> <tr> <td style="width: 60%; height: 40px; vertical-align: top;">Application Number 10/538,201</td> <td style="width: 40%; height: 40px; vertical-align: top;">Filed March 8, 2006</td> </tr> <tr> <td colspan="2" style="height: 40px; vertical-align: top;">For ANTIBODY ("11C7") ANTI NOGO AND ITS PHARMACEUTICAL USE</td> </tr> <tr> <td style="height: 40px; vertical-align: top;">Art Unit 1647</td> <td style="height: 40px; vertical-align: top;">Examiner S. L. Wegert</td> </tr> </table>			In re Application of Carmen Barske et al.		Application Number 10/538,201	Filed March 8, 2006	For ANTIBODY ("11C7") ANTI NOGO AND ITS PHARMACEUTICAL USE		Art Unit 1647	Examiner S. L. Wegert
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<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ <u>540.00</u></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>04-1105</u>.</p> <p><input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p> <p>WARNING: INFORMATION ON THIS FORM MAY BECOME PUBLIC. CREDIT CARD INFORMATION SHOULD NOT BE INCLUDED ON THIS FORM. PROVIDE CREDIT CARD INFORMATION AND AUTHORIZATION ON PTO-2038.</p> <p>I am the</p> <table style="width: 100%;"> <tr> <td style="width: 60%; vertical-align: top;"> <input type="checkbox"/> applicant /inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>54,849</u> <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____ </td> <td style="width: 40%; vertical-align: top; text-align: center;"> <u>/Amy DeCloux/</u> Signature <u>Amy DeCloux</u> Typed or printed name <u>(617) 239-0294</u> Telephone number <u>December 14, 2009</u> Date </td> </tr> </table>			<input type="checkbox"/> applicant /inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>54,849</u> <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____	<u>/Amy DeCloux/</u> Signature <u>Amy DeCloux</u> Typed or printed name <u>(617) 239-0294</u> Telephone number <u>December 14, 2009</u> Date						
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<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p>										
<p><input type="checkbox"/> *Total of <u>1</u> forms are submitted.</p>										